

REQUEST FOR PATENT FEE REFUND

1 Date of Request: <u>7/6/95</u>		2 Serial/Patent # <u>08/462148</u>	
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3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/> Filing		<u>4/5/95</u>	\$ <u>240-</u>
<input type="checkbox"/> Amendment			\$
<input type="checkbox"/> Extension of Time			\$
<input type="checkbox"/> Notice of Appeal/Appeal			\$
<input type="checkbox"/> Petition			\$
<input type="checkbox"/> Issue			\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/> Maintenance			\$
<input type="checkbox"/> Assignment			\$
<input type="checkbox"/> Other			\$

	7 TOTAL AMOUNT OF REFUND	\$ <u>240-</u>
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10 REASON:	8 TO BE REFUNDED BY:				
<input checked="" type="checkbox"/> Overpayment	<input checked="" type="checkbox"/> Treasury Check				
<input type="checkbox"/> Duplicate Payment	<input checked="" type="checkbox"/> Credit Deposit A/C #:				
<input type="checkbox"/> No Fee Due (Explanation):	9 <table border="1" style="display: inline-table; text-align: center;"> <tr> <td style="width: 20px;">08</td> <td style="width: 20px;">--</td> <td style="width: 20px;">32</td> <td style="width: 20px;">55</td> </tr> </table>	08	--	32	55
08	--	32	55		

Paid fee multiple claims and there wasnt a need.

11 REFUND REQUESTED BY:	
TYPED/PRINTED NAME: <u>Kaya Lewis</u>	TITLE: <u>Examiner</u>
SIGNATURE: <u>Kaya Lewis</u>	PHONE: <u>308-3751</u>
OFFICE: <u>ONE STOP ONE ONAR</u>	
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****	
APPROVED: <u>Gudrey Guyman</u>	DATE: <u>7/24/95</u>

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B